| | | 1700.11111.111 | FAUE I ULDI | |
|---------------------------------|-------------------------|------------------------|-------------|------------------------------|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | Fiona Graham First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | nkruptcy Court for the: | DISTRICT OF NEW JERSEY | | _ |
| _ | 18-11502 | | | |
| (if known) | | | | ☐ Check if this amended fili |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| ı aı | t 1: Summarize Your Assets | | |
|------|--|-------------|----------------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 575,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 98,124.36 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 673,124.36 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | i abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 343,027.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 53,962.00 |
| | Your total liabilities | \$ | 396,989.00 |
| Pai | t 3: Summarize Your Income and Expenses | 1 | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,439.47 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,341.96 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a nersonal | family or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Debtor 1 Fiona Graham Document Page 2 of 51 Case number (if known) 18-11502

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_______4,191.55

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ous | C 10 11002 OLIVI | D00 1 | . Dog | cument | Page 3 of 51 | | , D | COO MAIN |
|---------------|------------------------|--|------------------|-----------|-------------------------------------|--|-----------------------|----------|---|
| Fill i | n this info | ormation to identify your | case and th | is filing | : | | | | |
| Debt | or 1 | Fiona Graham | | | | | | | |
| . | | First Name | Middle | Name | | Last Name | | | |
| Debt Spous | or 2 se, if filing) | First Name | Middle | Name | | Last Name | | | |
| Unite | ed States E | Bankruptcy Court for the: | DISTRICT | OF NEV | V JERSEY | | | | |
| _ | | | | | | | | | |
| Jase | number | 18-11502 | | | | _ | | | Check if this is an amended filing |
| | | | | | | | | | |
| Offi | icial F | orm 106A/B | | | | | | | |
| Sc | hedu | le A/B: Prop | erty | | | | | | 12/15 |
| | | | | | | an asset fits in more than one | | | |
| | | | | | | le are filing together, both are ne top of any additional pages | | | |
| nswe | er every qu | estion. | · | | | | . • | | , |
| Part 1 | l: Describ | oe Each Residence, Buildin | g, Land, or Ot | her Real | Estate You O | wn or Have an Interest In | | | |
| Do | vou own o | or have any legal or equitab | le interest in a | nv resid | ence. buildinc | ı, land, or similar property? | | | |
| | • | , . | | , | , <u>-</u> | ,,, pp, | | | |
| _ | No. Go to F | | | | | | | | |
| _ | Yes. Where | e is the property? | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 1.1 | 92 Now | York Avenue | | What | | ty? Check all that apply | | | |
| _ | | ss, if available, or other description | 1 | | Single-family | | | | s or exemptions. Put aims on <i>Schedule D:</i> |
| | | • | | | • | ılti-unit building n or cooperative | | | Secured by Property. |
| | | | | | Condominium | Tor cooperative | | | |
| | | | | | Manufactured | d or mobile home | Current value of t | he C | Current value of the |
| - | Dumont | | 629-0000 | | Land | | entire property? | • | ortion you own? |
| | City | State | ZIP Code | 片 | Investment portion | roperty | \$575,000 | 0.00 | \$575,000.00 |
| | | | | ä | Other | | | | ownership interest by by the entireties, or |
| | | | | Who | | at in the property? Check one | a life estate), if kr | | y by the enthenes, or |
| | | | | | Debtor 1 only | , | | | |
| _ | | | | | Debtor 2 only | 1 | | | |
| | County | | | | Debtor 1 and | Debtor 2 only | ☐ Check if this | is commu | nity property |
| | | | | | At least one of | of the debtors and another | (see instructions | | 3 F - F - 3 |
| | | | | | r information y erty identificat | ou wish to add about this iter ion number: | n, such as local | | |
| | | | | Two | -Family Ho | use (owned jointly with | parents) | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | from Part 1, including any | entries for | | ¢575 000 00 |
| | | have attached for Part | 1 Write that | numbo | r horo | | | I | \$575,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) 18-11502 Debtor 1 Fiona Graham 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Journey Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2016 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 12,981 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **Good Condition** \$14,971.00 \$14,971.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Dodge Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Ram Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model 2000 Debtor 2 only Current value of the Current value of the 95,000 Approximate mileage: entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another **Fair Condition** \$762.00 \$762.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,733.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household Goods - 12 rooms (average age 15 years) (owned \$5,000,00 jointly with parents) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... TV/Laptop/lpad/Xbox/Cell Phone \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No

Official Form 106A/B Schedule A/B: Property page 2

| Case | | Entered 02/19/18 18: | 17:07 Desc Main |
|-------------------------------------|--|--|--|
| Debtor 1 Fig | Document Pa | age 5 of 51 Case number <i>(if kr</i> | nown) 18-11502 |
| Yes. Desc | cribe | | |
| | Books | | \$50.00 |
| Examples: Sp | or sports and hobbies ports, photographic, exercise, and other hobby equipment; bicyclusical instruments cribe | les, pool tables, golf clubs, skis; car | noes and kayaks; carpentry tools; |
| | Hobby Equipment | | \$50.00 |
| ■ No □ Yes. Desc | Everyday clothes, furs, leather coats, designer wear, shoes, acco | essories | |
| | Clothing | | \$325.00 |
| Yes. Desc | cribe | | |
| | Jewelry | | \$2,500.00 |
| No ☐ Yes. Desc 4. Any other p ☐ No | Dogs, cats, birds, horses | ling any health aids you did not l | ist |
| | ollar value of all of your entries from Part 3, including any er Write that number here | | \$8,425.00 |
| | e Your Financial Assets | | Current value of the |
| Do you own or | have any legal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | Money you have in your wallet, in your home, in a safe deposit b | ox, and on hand when you file your | petition |
| – 168 | | | ** |
| | | Cash | \$50.00 |

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 **Fiona Graham** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking Account at Bank of America, 17.1. **Dumont, New Jersey** \$0.49 Savings Account at Bank of America, **Dumont, New Jersey (joint with mother)** \$0.25 17.2. Checking Account at TD Bank, Bergenfield, **New Jersey** \$1,200.00 17.3 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) Through Employer With Lincoln \$67.341.02 **Financial** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Page 7 of 51
Case number (if known) 18-11502 Document Debtor 1 **Fiona Graham** 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... **Estimated 2017 Income Tax Refund** (debtor was out of work for 6 months) \$3.800.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Whole Life Insurance Policy With New Mother and Father \$1,574.60 York Life **Term Life Insurance Policy Through** \$0.00 **Brother Employer** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

Filed 02/19/18 Entered 02/19/18 18:17:07 Desc Main

■ No

Case 18-11502-SLM

Doc 14

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Case number (if known) 18-11502 Document Debtor 1 Fiona Graham ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$73,966.36 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Nο ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$575,000.00 56. Part 2: Total vehicles, line 5 \$15,733.00 57. Part 3: Total personal and household items, line 15 \$8,425.00 Part 4: Total financial assets, line 36 \$73,966.36 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$98.124.36 Copy personal property total \$98.124.36 Total of all property on Schedule A/B. Add line 55 + line 62 \$673,124.36

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|---------------------|-----------|-------------------------------|
| Debtor 1 | Fiona Graham | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEW JER | SEY | |
| _ | 18-11502 | | | |
| (if known) | | | | ☐ Check if this amended filin |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt |
|---|
|---|

| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if yo | our spouse is filing with you. | |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | |
| | ■ You are claiming federal exemptions. 11 l | J.S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | mpt, | fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | 82 New York Avenue Dumont, NJ 07629 | \$575,000.00 | | \$16,326.00 | 11 U.S.C. § 522(d)(1) |
| | Two-Family House (owned jointly with parents) Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 2016 Dodge Journey 12,981 miles Good Condition | \$14,971.00 | | \$0.00 | 11 U.S.C. § 522(d)(2) |
| | Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 2000 Dodge Ram 95,000 miles Fair Condition | \$762.00 | | \$762.00 | 11 U.S.C. § 522(d)(2) |
| | Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Household Goods - 12 rooms (average age 15 years) (owned jointly | \$5,000.00 | | \$5,000.00 | 11 U.S.C. § 522(d)(3) |
| | with parents) Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | TV/Laptop/lpad/Xbox/Cell Phone Line from Schedule A/B: 7.1 | \$500.00 | | \$500.00 | 11 U.S.C. § 522(d)(3) |
| | LINE HOLL SCHEUUIE PAD. 1-1 | | | 100% of fair market value, up to any applicable statutory limit | |

Page 10 of 51
Case number (if known) Document

| tor 1 | Fiona Graham | Document | F | Page 10 of 51 Case number (if known) | 18-11502 |
|---------|---|--------------------------------------|-----|---|------------------------------------|
| | description of the property and line on full A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| ounca | are AD that had this property | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Book | | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) |
| Line fi | rom Schedule A/B: 8.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | by Equipment rom Schedule A/B: 9.1 | \$50.00 | - | \$50.00 | 11 U.S.C. § 522(d)(3) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| Cloth | ning rom Schedule A/B: 11.1 | \$325.00 | | \$325.00 | 11 U.S.C. § 522(d)(3) |
| LING | ioni ochodule A/D. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Jewe | elry rom Schedule A/B: 12.1 | \$2,500.00 | | \$1,600.00 | 11 U.S.C. § 522(d)(4) |
| | ioni concada 775. Tari | | | 100% of fair market value, up to any applicable statutory limit | |
| Jewe | elry rom Schedule A/B: 12.1 | \$2,500.00 | | \$900.00 | 11 U.S.C. § 522(d)(5) |
| LING | ioni ochedule A/D. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Cash | rom Schedule A/B: 16.1 | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(5) |
| LING | ioni ochedule A/D. 1011 | | | 100% of fair market value, up to any applicable statutory limit | |
| | king Account at Bank of rica, Dumont, New Jersey | \$0.49 | | \$0.49 | 11 U.S.C. § 522(d)(5) |
| | rom Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| _ | ngs Account at Bank of America, ont, New Jersey (joint with | \$0.25 | | \$0.25 | 11 U.S.C. § 522(d)(5) |
| moth | | | | 100% of fair market value, up to any applicable statutory limit | |
| | king Account at TD Bank, enfield, New Jersey | \$1,200.00 | | \$1,200.00 | 11 U.S.C. § 522(d)(5) |
| | rom Schedule A/B: 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | k) Through Employer With | \$67,341.02 | | \$67,341.02 | 11 U.S.C. § 522(d)(12) |
| | rom Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | nated 2017 Income Tax Refund tor was out of work for 6 | \$3,800.00 | | \$3,800.00 | 11 U.S.C. § 522(d)(5) |
| mont | | | | 100% of fair market value, up to any applicable statutory limit | |
| | le Life Insurance Policy With York Life | \$1,574.60 | | \$1,574.60 | 11 U.S.C. § 522(d)(8) |
| | eficiary: Mother and Father | | | 100% of fair market value, up to | |

Case 18-11502-SLM Doc 14 Filed 02/19/18 Entered 02/19/18 18:17:07 Document Page 11 of 51 Case number (if known) Debtor 1 Fiona Graham 18-11502 Brief description of the property and line on *Schedule A/B* that lists this property Amount of the exemption you claim Current value of the Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Term Life Insurance Policy Through** 11 U.S.C. § 522(d)(7) \$0.00 \$0.00

| | Ben | ployer neficiary: Brother from Schedule A/B: 31.2 | | 100% of fair market value, up to any applicable statutory limit | |
|----|-----|--|-----------------------|---|--|
| 3. | | you claiming a homestead exemption of more object to adjustment on 4/01/19 and every 3 years No | . , | ed on or after the date of adjustment.) | |
| | | Yes. Did you acquire the property covered by th ☐ No ☐ Yes | e exemption within 1, | 215 days before you filed this case? | |

Desc Main

| | Document F | Page 12 | ² of 51 | | |
|--|---|---------------|------------------------------------|-------------------------|-------------------|
| Fill in this information to identify you | ur case: | | | | |
| Debtor 1 Fiona Graham | | | | | |
| First Name | Middle Name L | ast Name | | - | |
| Debtor 2 | | | | | |
| (Spouse if, filing) First Name | Middle Name L | ast Name | | - | |
| United States Bankruptcy Court for the | : DISTRICT OF NEW JERSEY | | | | |
| Officed States Bankruptcy Court for the | . BIOTRIOT OF NEW SERGET | | | - | |
| Case number 18-11502 | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | led filing |
| 0/// 1.5 | | | | | |
| Official Form 106D | | | | | |
| Schedule D: Creditors | Who Have Claims So | ecure | d by Propert | V | 12/15 |
| | | | <u> </u> | | |
| Be as complete and accurate as possible. is needed, copy the Additional Page, fill it | | | | | |
| number (if known). | out, number the onthoe, and attach it to | | in the top of any addition | nai pagoo, mito your na | mo una cacc |
| 1. Do any creditors have claims secured b | y your property? | | | | |
| ☐ No. Check this box and submit t | his form to the court with your other sc | hedules. Y | ou have nothing else t | to report on this form. | |
| ■ Yes. Fill in all of the information | • | | ŭ | • | |
| | below. | | | | |
| Part 1: List All Secured Claims | | | Column A | Column B | Column C |
| 2. List all secured claims. If a creditor has | | | 1 | Value of collateral | |
| for each claim. If more than one creditor has much as possible, list the claims in alphabet | | Part 2. AS | Amount of claim Do not deduct the | that supports this | Unsecured portion |
| | • | | value of collateral. | claim | if any |
| 2.1 Ally Financial | Describe the property that secures the | | \$30,982.00 | \$14,971.00 | \$16,011.00 |
| Creditor's Name | 2016 Dodge Journey 12,981 m | iles | | | |
| | Good Condition | | | | |
| 200 Renaissance Center | As of the date you file, the claim is: Che | eck all that | | | |
| Detroit, MI 48243 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| Number, direct, dity, diate & 219 dode | ☐ Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as more | rtgage or sec | cured | | |
| Debtor 2 only | car loan) | 3-3 | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mecha | inic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a | _ | uto Loan | | | |
| community debt | — Other (including a right to onset) | | | | |
| Date debt was incurred | Last 4 digits of account number | 3765 | | | |
| Date dept was incurred | | 3703 | | | |
| 2.2 Ally Financial | Describe the property that secures the | alaim. | ¢0.00 | ¢44.074.00 | ¢0.00 |
| 2.2 Ally Financial Creditor's Name | | | \$0.00 | \$14,971.00 | \$0.00 |
| Croanor o rearrie | 2016 Dodge Journey 12,981 m Good Condition | lies | | | |
| Att: Bankruptcy | Soou Condition | | | | |
| P.O. Box 380901 | As of the date you file, the claim is: Che | eck all that | | | |
| Bloomington, MN 55438 | apply. Contingent | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | |
| | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mo | rtgage or sec | cured | | |
| Debtor 2 only | car loan) | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | , | | | |
| ☐ Check if this claim relates to a | _ | otice Pur | poses Only | | |
| community debt | | | _ | | |
| Date debt was incurred | Last 4 digits of account number | | | | |

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| Debtor 1 Fiona Graham | | Case number (if know) | 18-11502 | |
|---|--|-----------------------|--------------|-------------|
| First Name Middle N | lame Last Name | | | |
| 2.3 Dumont Tax Collector | Describe the property that secures the claim: | \$0.00 | \$575,000.00 | \$0.00 |
| Creditor's Name | 82 New York Avenue Dumont, NJ | Ψ0.00 | Ψ313,000.00 | Ψ0.00 |
| | 07629 | | | |
| | Two-Family House (owned jointly | | | |
| | with parents) As of the date you file, the claim is: Check all that | | | |
| 50 Washington Avenue | apply. | | | |
| Dumont, NJ 07628 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who awas the debt2 of | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | 1 | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | ☐ An agreement you made (such as mortgage or securioan) | ecurea | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | - | te Taxes - Notice Pur | rposes Only | |
| community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Date debt was mounted | | | | |
| 2.4 Quicken Loans | Describe the property that secures the claim: | \$312,045.00 | \$575,000.00 | \$0.00 |
| Creditor's Name | 82 New York Avenue Dumont, NJ | | | ****** |
| | 07629 | | | |
| | Two-Family House (owned jointly | | | |
| | with parents) As of the date you file, the claim is: Check all that | | | |
| P.O. Box 6577 | apply. | | | |
| Carol Stream, IL 60197 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) First Mort | gage - Principal | | |
| Date debt was incurred 12/30/1999 | Last 4 digits of account number | | | |
| | | | | |
| 2.5 Quicken Loans | Describe the property that secures the claim: | \$0.00 | \$575,000.00 | \$0.00 |
| Creditor's Name | 82 New York Avenue Dumont, NJ | | | |
| | 07629 | | | |
| | Two-Family House (owned jointly | | | |
| | with parents) As of the date you file, the claim is: Check all that | | | |
| 1050 Woodward Avenue Detroit, MI 48226 | apply. | | | |
| Number, Street, City, State & Zip Code | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Notice Pu | rposes Only | | |
| Date debt was incurred | Last 4 digits of account number | | | |

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Debtor 1 Fiona Graham
First Name Middle Name Last Name

Case number (if know) 18-11502

Add the dollar value of your entries in Column A on this page. Write that number here: \$343,027.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$343,027.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case 18-11502-5LIVI | Doc 14 Filed 02/19 | Page 1 | tereu 02/19/18 18 5 of 51 | 0.17.07 L | Jest Main |
|---------------------------------|---|--|-------------------------------|--|----------------------------------|---|
| Fill in t | his information to identify your ca | | Paue | | | |
| | | | | | | |
| Debtor | 1 Fiona Graham First Name | Middle Name | Last Name | | | |
| Debtor | | | | | | |
| (Spouse i | f, filing) First Name | Middle Name | Last Name | | | |
| United | States Bankruptcy Court for the: | DISTRICT OF NEW JERSEY | | | | |
| Case n (if known) | | | | | | heck if this is an mended filing |
| Sche | al Form 106E/F dule E/F: Creditors Whomplete and accurate as possible. Use | | | Part 2 for creditors with NOI | NPRIORITY clain | 12/15 ns. List the other party to |
| Schedul Schedul eft. Atta | cutory contracts or unexpired leases the G: Executory Contracts and Unexpire ED: Creditors Who Have Claims Secur ch the Continuation Page to this page. d case number (if known). | ed Leases (Official Form 106G). De ed by Property. If more space is n | o not include needed, copy | any creditors with partially the Part you need, fill it out, | secured claims number the ent | that are listed in ries in the boxes on the |
| Part 1: | List All of Your PRIORITY Unse | ecured Claims | | | | |
| 1. Do | any creditors have priority unsecured | claims against you? | | | | |
| | No. Go to Part 2. | | | | | |
| | Yes. | | | | | |
| Part 2: | List All of Your NONPRIORITY | Unsecured Claims | | | | |
| 3. Do | any creditors have nonpriority unsecu | red claims against you? | | | | |
| | No. You have nothing to report in this part | t. Submit this form to the court with y | your other sch | edules. | | |
| | Yes. | | | | | |
| uns | t all of your nonpriority unsecured clain ecured claim, list the creditor separately for none creditor holds a particular claim, list t 2. | or each claim. For each claim listed, | , identify what t | type of claim it is. Do not list cl | aims already incl | uded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Bank of America | Last 4 digits of acco | ount number | 7813 | | \$9,413.00 |
| | Nonpriority Creditor's Name | | | | | |
| | Nc4-105-03-14 P.O. Box 26012 | When was the debt | incurred? | | | |
| | Greensboro, NC 27410 | | | | | |
| | Number Street City State Zlp Code | As of the date you f | ile, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and anoth | | ITY unsecure | d claim: | | |
| | Check if this claim is for a commu | _ | | | | |
| | debt Is the claim subject to offset? | Obligations arising report as priority clair | | aration agreement or divorce the | nat you did not | |
| | No | | | ng plans, and other similar deb | ts | |
| | | | | | | |
| | Yes | Other. Specify | Sieuit Card | 4 | | |

| Debto | or 1 Fiona Graham | Document Page 16 of 51 Case number (if know) 18-11502 | |
|-------|---|---|------------|
| 4.2 | Bank of America | Last 4 digits of account number 8736 | \$9,115.00 |
| | Nonpriority Creditor's Name Nc4-105-03-14 P.O. Box 26012 Greensboro, NC 27410 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | ■ Other. Specify Credit Card | |
| 4.3 | Bank of America | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name P.O. Box 15019 Wilmington, DE 19886-5019 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Additional Address For Notice Purposes | |
| 4.4 | Bank of America | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name P.O. Box 982238 | When was the debt incurred? | |
| | EI Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | _ | Поло | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Notice Purposes Only

| | | Document | Page 17 of 51 | |
|----------|--------------|----------|-----------------------|----------|
| Debtor 1 | Fiona Graham | | Case number (if know) | 18-11502 |

| 4.5 Bank of America | | Last 4 digits of account number | \$0.00 |
|---------------------|---|---|--------|
| | Nonpriority Creditor's Name P.O. Box 982238 El Paso, TX 79998 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Notice Purposes Only | |
| 4.6 | Bank of America (FDIC) | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name Corporate Office 100 North Tryon Street Charlotte, NC 28202 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Additional Address For Notice Purposes | |
| 4.7 | Best Buy Corporate Headquarters | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 7601 Penn Avenue S (at 7th Street) Richfield, MN 55423 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Notice Purposes Only | |

| Last 4 digits of account number | |
|---|---|
| | |
| When was the debt incurred? | |
| As of the date you file, the claim is: Check all that apply | |
| | |
| ☐ Contingent | |
| ☐ Unliquidated | |
| ☐ Disputed | |
| Type of NONPRIORITY unsecured claim: | |
| ☐ Student loans | |
| \square Obligations arising out of a separation agreement or divorce that you did not | |
| <u></u> | |
| | |
| ■ Other. Specify Notice Purposes Only | |
| Last 4 digits of account number | |
| When was the debt incurred? | |
| Then was the dest modified. | |
| As of the date you file, the claim is: Check all that apply | |
| | |
| ☐ Contingent | |
| ☐ Unliquidated | |
| ☐ Disputed | |
| Type of NONPRIORITY unsecured claim: | |
| ☐ Student loans | |
| Obligations arising out of a separation agreement or divorce that you did not | |
| <u> </u> | |
| | |
| ■ Other. Specify Additional Address For Notice Purposes | |
| Lock Adjuste of cooping number | |
| Last 4 digits of account number | |
| When was the debt incurred? | |
| | |
| As of the date you file, the claim is: Check all that apply | |
| | |
| ☐ Contingent | |
| | □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purposes Only Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Additional Address For Notice Purposes Last 4 digits of account number |

Debtor 2 only ☐ Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another $\hfill\Box$ Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Disputed Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Additional Address For Notice Purposes Casa 18-11502-SLM Filed 02/10/18 Entered 02/10/18 18:17:07

| Debte | or 1 Fiona Graham | Document Page 19 of 51 Case number (if know) 18-11502 | |
|-------|---|---|------------|
| 4.1 | Capital One Bank USA | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083 | When was the debt incurred? | <u> </u> |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Additional Address For Notice Purposes | |
| 4.1 | Capital One Bank USA NA | Last 4 digits of account number 1617 | \$2,252.00 |
| 2] | Nonpriority Creditor's Name Att: General Correspondence Bankruptcy | When was the debt incurred? | ΨΣ,ΣΟΣ:00 |
| | P.O. Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Best Buy | |
| 4.1 | Citi | | \$0.00 |
| 3 | Nonpriority Creditor's Name | Last 4 digits of account number | φυ.υυ |
| | P.O. Box 6241 Sioux Falls, SD 57117 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |

debt

■ No

☐ Yes

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Notice Purposes Only

☐ Student loans

report as priority claims

 $\hfill\Box$ Check if this claim is for a community

Is the claim subject to offset?

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Page 20 of 51 Debtor 1 Fiona Graham Case number (if know) 18-11502 4.1 Citi \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6241 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Authorized User - Notice Purposes Only ☐ Yes 4.1 Citi 5979 \$2,076.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6241 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Citi Cards \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 9001037 When was the debt incurred? Louisville, KY 40290-1037 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Additional Address For Notice Purposes

| Debto | Case 18-11502-SLM Doc 14 | Filed 02/19/18 Entered 02/19/18 18:17:07 Desc Ma Document Page 21 of 51 Case number (if know) 18-11502 | ain |
|----------|--|--|--------|
| 4.1 7 | Citibank South Dakota, N.A. (FDIC) | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 701 East 60th Street Sioux Falls, SD 57104 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Additional Address For Notice Purposes | |

| Citibank, NA (FDIC) | Last 4 digits of account number | |
|---|---|--|
| Nonpriority Creditor's Name 701 East 60th Street, North | When was the debt incurred? | |
| Sioux Falls, SD 57104 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Additional Address For Notice Purposes | |

| Citibank/Sears | Last 4 digits of account number 5798 |
|--|---|
| Nonpriority Creditor's Name Citicorp Credit Services Att: Centralized Bankruptcy | When was the debt incurred? |
| P.O. Box 790040 Saint Louis, MO 63179 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply |
| ■ Debtor 1 only | ☐ Contingent |
| Debtor 2 only | ☐ Unliquidated |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: |
| ☐ Check if this claim is for a community | ☐ Student loans |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts |
| Yes | ■ Other. Specify Credit Card |

4.1 8

4.1 9 \$0.00

\$7,024.00

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Case number (if know) Debtor 1 Fiona Graham 18-11502 4.2 Citicards CBNA 2187 \$9,041.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **Citicorp Credit Services** When was the debt incurred? Centralized Bankruptcy P.O. Box 790040 Saint Louis, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Π Yes ■ Other. Specify Credit Card 4.2 Citicards CBNA 0487 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **Citicorp Credit Services** When was the debt incurred? Centralized Bankruptcy P.O. Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Authorized User - Notice Purposes Only ☐ Yes 4.2 **Citicards CBNA** \$2,076.00 5979 Last 4 digits of account number Nonpriority Creditor's Name **Citicorp Credit Services** When was the debt incurred? Centralized Bankruptcy P.O. Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

■ Other. Specify Credit Card

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| Debt | Fiona Graham | Case number (if know) 18-11502 | | |
|------|--|--|--------------|--|
| 4.2 | Costco Citi | Last 4 digits of account number 1347 | \$9,000.00 | |
| 3 | Nonpriority Creditor's Name | Last 4 digits of account number 1347 | φ9,000.00 | |
| | P.O. Box 6190 | When was the debt incurred? | | |
| | Sioux Falls, SD 57117 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify Credit Card | | |
| 4.2 | Contan Co Amunuhara Citianud | Last 4 digits of account number 1347 | #0.00 | |
| 4 | Costco Go Anywhere Citicard Nonpriority Creditor's Name | Last 4 digits of account number 1347 | \$0.00 | |
| | Citicorp Credit Card Services | When was the debt incurred? | | |
| | Centralized Bankruptcy | | | |
| | P.O. Box 790040 | | | |
| | Saint Louis, MO 63179 | _ , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | _ | | | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify Notice Purposes Only | | |
| 4.2 | | | | |
| 5 | Costco Headquarters | Last 4 digits of account number | \$0.00 | |
| | Nonpriority Creditor's Name 999 Lake Drive | When was the debt incurred? | | |
| | Issaquah, WA 98027 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | and another Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | □Yes | ■ Other. Specify Notice Purposes Only | | |
| | | | | |

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Document Page 24 of 51 Debtor 1 Fiona Graham Case number (if know) 18-11502 4.2 Discover Bank (FDIC) \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 502 E. Market Street When was the debt incurred? Greenwood, DE 19950 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Additional Address For Notice Purposes ☐ Yes 4.2 **Discover Financial** 8930 \$3,965.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3025 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 Equifax \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1550 Peartree Street NW When was the debt incurred? Atlanta, GA 30309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purposes Only ☐ Yes

| Debt | or 1 Fiona Graham | Document Page 25 of 51 Case number (if know) 18-11502 | |
|----------|--|--|--------------|
| | - I long Granam | 10 11302 | |
| 4.2 9 | Experian | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name 475 Anton Boulevard | When was the debt incurred? | |
| | Costa Mesa, CA 92626 | As at the date way file the plains in Charle III that such | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Notice Purposes Only | |
| 4.3 | Macy's | | \$0.00 |
| 0 | Nonpriority Creditor's Name | Last 4 digits of account number | φυ.υυ |
| | 9111 Duke Boulevard Mason, OH 45040 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Additional Address For Notice Purposes | |
| 4.3 | Macy's Corporate Office & | | £0.00 |
| 1 | Headquarters Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
| | 7 West 7th Street | When was the debt incurred? | |
| | Cincinnati, OH 45202 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Additional Address For Notice Purposes

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Document Page 26 of 51 Debtor 1 Fiona Graham Case number (if know) 18-11502 4.3 Sears \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 78051 When was the debt incurred? Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Additional Address For Notice Purposes ☐ Yes 4.3 \$0.00 Sears Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6282 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purposes Only ☐ Yes 4.3 Sears Corporate Headquarters \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 3333 Beverly Road When was the debt incurred? Hoffman Estates, IL 60179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Additional Address For Notice Purposes ☐ Yes

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Case number (if know) Debtor 1 Fiona Graham 18-11502 4.3 **Trans Union** \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 2000 When was the debt incurred? Chester, PA 19022-2000 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Purposes Only ☐ Yes 4.3 **Trans Union Corporate Office** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 555 W. Adams Street When was the debt incurred? Chicago, IL 60661 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purposes Only ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bank of America** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982238 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bank of America** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982238 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Citibank/Sears Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 6282 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Citicards CBNA Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 6241 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117

Official Form 106 E/F

Last 4 digits of account number

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18-11502

| Name and Address | On which entry in Part 1 or Part 2 | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
|---|--|--|---|--|
| Citicards CBNA | Line 4.21 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| P.O. Box 6241 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Sioux Falls, SD 57117 | Last 4 digits of account number | | | |
| Name and Address On which entry in Part 1 or Part 2 did you | | 2 did you list the original creditor? | _ | |
| Citicards CBNA | Line 4.22 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| P.O. Box 6241 Sioux Falls, SD 57117 | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | Last 4 digits of account number | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Costco Go Anywhere Citicard | Line 4.24 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| P.O. Box 6190 Sioux Falls, SD 57117 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | Last 4 digits of account number | | | |
| Name and Address | On which entry in Part 1 or Part 2 | 2 did you list the original creditor? | | |
| Discover Financial | Line 4.27 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | | |
| P.O. Box 15316 Wilmington, DE 19850 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Trimington, DE 10000 | Last 4 digits of account number | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Fiona Graham

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | 6f. | Student loans | 6f. | \$ Total Claim 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 53,962.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 53,962.00 |

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|----------------------|-----------|-----------------------------------|
| Debtor 1 | Fiona Graham | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | DISTRICT OF NEW JERS | SEY | |
| Case number | 18-11502 | | | |
| (if known) | | | | ☐ Check if this is amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number | whom you have the Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | Oity | | Otate | Zii Code | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | , | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

| | | Document | Page 30 of 51 | |
|--|---|--|--|---|
| Fill in thi | s information to identify your | case: | | |
| Debtor 1 | Fiona Graham | | | |
| D - l- 1 0 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, f | iling) First Name | Middle Name | Last Name | _ |
| Unitad St | ates Bankruptcy Court for the: | DISTRICT OF NEW JERSEY | | |
| Officed St | ates bankruptcy Court for the. | DIGITION OF NEW SERGET | | _ |
| Case nur | nber 18-11502 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | |
| Officia | al Form 106H | | | |
| Sche | dule H: Your Cod | ebtors | | 12/15 |
| Deople ar ill it out, your nam 1. Do No Ye 2. Wi Arizo No Ye 3. In Co in lin Forn | e filing together, both are equand number the entries in the e and case number (if known) by you have any codebtors? (If you have any codebtors? (If you have any codebtors?) (If you have any codebtors, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have a grant of the last 8 years, have you have any codebtors. It is all of your codebtor of your span of your codebtor of your again as a codebtor only if | ally responsible for supplying of boxes on the left. Attach the A. Answer every question. you are filing a joint case, do not lived in a community property Nevada, New Mexico, Puerto Riuse, or legal equivalent live with yors. Do not include your spous f that person is a guarantor or second to the property of the control of the contro | correct information. If more space dditional Page to this page. On the list either spouse as a codebtor. state or territory? (Community page) co., Texas, Washington, and Wiscon ou at the time? see as a codebtor if your spouse it cosigner. Make sure you have list | accurate as possible. If two married ce is needed, copy the Additional Page, the top of any Additional Pages, write the top of any Additional Pages, write property states and territories include onsin.) Is filing with you. List the person shown sted the creditor on Schedule D (Official ule D, Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and Zl | P Code | | The creditor to whom you owe the debt |
| | Name, Number, Street, Oity, State and Zi | r Code | Check all sc | hedules that apply: |
| 3.1 | John and Patricia Graham 82 New York Avenue Apartment No. 1 NJ 07628 | 1 | ■ Schedule □ Schedule □ Schedule Quicken Le | e E/F, line e G |
| 3.2 | John and Patricia Graham 82 New York Avenue Apartment No. 1 Dumont, NJ 07628 | 1 | | |
| 3.3 | John and Patricia Graham 82 New York Avenue Apartment No. 1 Dumont, NJ 07628 | 1 | ☐ Schedule | e D, line e E/F, line e G ax Collector |

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| Fill | in this information to identify your o | case: | | | | | | | |
|---------------|---|---|-----------------------------|-----------|------|----------------|----------------|------------------------------------|---------|
| Deb | otor 1 Fiona Grah | am | | | | | | | |
| | otor 2 | | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | e: DISTRICT OF NEW J | JERSEY | | _ | | | | |
| Cas | se number 18-11502 | | | | | Check if the | s is: | | |
| (If kn | own) | | _ | | | ☐ An ame | nded filing | | |
| | | | | | | | | ng postpetition following date: | |
| <u>O</u> 1 | fficial Form 106I | | | | | MM / D | D/ YYYY | | |
| So | chedule I: Your Inc | ome | | | | | | | 12/1 |
| spoi attad | | ur spouse is not filing w On the top of any additi | ith you, do not inclu | ıde infor | mati | on about your | spouse. If m | ore space is | needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Deb | or 2 or non-f | filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | | ☐ Employed | | |
| | attach a separate page with information about additional employers. | □ Not employed | | | | ☐ Not employed | | | |
| | | Occupation | Registered Nur | se | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Valley Hospital | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 223 North Van Ridgewood, NJ | | | | | | |
| | | How long employed t | here? 14 year | rs | | | | | |
| Par | t 2: Give Details About Mo | nthly Income | | | | | | | |
| spou If yo | mate monthly income as of the ones as a second of the | date you file this form. If | , | • | , | , , | erson on the l | , | J |
| 2. | List monthly gross wages, saladeductions). If not paid monthly, | | | 2. | \$ | 4,986. | 58_ \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0. | 00 +\$ _ | N/A | |
| 4. | Calculate gross Income. Add I | ine 2 + line 3. | | 4. | \$ | 4,986.58 | \$ | N/A | |

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| Debto | r 1 | Fiona Graham | - | Case r | number (if known) | 18-11 | 502 | | |
|-------|-----------------------------------|---|--------|---------|-------------------|-------------|--------------------|----------------|------------------|
| | | | | For | Debtor 1 | | Debtor filing s | | |
| | Cop | by line 4 here | 4. | \$ | 4,986.58 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,118.08 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 498.66 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | \$ | 580.37 | \$ | | N/A | 1 |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h.+ | \$ | 0.00 | + \$ | | N/A | <u> </u> |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 2,197.11 | \$ | | N/A | <u> </u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,789.47 | \$ | | N/A | <u> </u> |
| | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 1 900 00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b. | \$- | 1,800.00 0.00 | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | * \$ | 0.00 | \$ \$ | | N/A | _ |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | <u>\$</u> — | | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: Tax Refund | 8h.+ | \$ | 850.00 | + \$ | | N/A | <u></u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 2,650.00 | \$ | | N/ | A |
| 10 | Cald | culate monthly income. Add line 7 + line 9. | 10. \$ | | 5,439.47 + \$ | | N/A | = \$ | 5,439.47 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | ,,433.47 | | 11// | _ | 0,400.41 |
| 11. | Stat Included Other Door | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depen | | | | chedule 11. | _ | 0.00 |
| , | | If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | 12. | \$ | 5,439.47 |
| 13. | Do ' | you expect an increase or decrease within the year after you file this form | ? | | | | • | Combi month | ned ly income |
| | | No. | | | | | | | |

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| Debtor 1 Fiona Graham | Fill | in this informat | tion to identify yo | our case: | | | | | |
|---|-------|------------------|---------------------|-----------------|----------------------------|----------------------|-------------|-----------------|----------|
| Debror 2 | Deb | tor 1 | Fiona Graha | m | | | Che | eck if this is: | |
| Spouse, if filing 13 expenses as of the following date: | Dob | tor O | | | | | | ū | |
| Case number 18-11502 Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No Do you have dependents? No Do you have dependents? Do you have dependents? No Do not list Debtor 1 and Yes. Fill out this information for sech dependent are lated to the dependent and your dependents are lated to the dependent and your dependents? No No No So you have dependents? Do you have dependents? No Do not state the dependents anames. No No No Yes Stimute Your Ongoing Monthly Expenses Stimute Your or your Expenses of your bankruptcy lifting date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J., check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. S 0.00 4b. Property, homeowner's, or renter's insurance 4c. S 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. S 0.000 | | | | | | | | | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Tatt | Unite | ed States Bankr | uptcy Court for the | : DISTRI | CT OF NEW JERSEY | | | MM / DD / YYYY | |
| Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Tatt | Coo | anumbar 10 | 11500 | | | | | | |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Rate Describe Your Household | | | -11302 | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part Describe Your Household | Of | fficial Fo | rm 106J | | | | | | |
| information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Pati Describe Your Household | | | | | | | | | |
| 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. No. Pers. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for Debtor 1 or Debtor 2. Do not state the dependents names. No. Yes. No. Yes. No. Yes. Solution of people other than yourself and your dependents? Estimate Your expenses as of your bankruptcy lilling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 100 100 100 100 100 100 10 | info | rmation. If m | ore space is ne | eded, atta | ch another sheet to this | | | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Do not state the dependents names. Do not state the dependents names. No Yes No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes Stimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues | | | | hold | | | | | |
| Yes. Destor 2 live in a separate household? No | 1. | _ | | | | | | | |
| No | | 00 | =: | in a senar | ate household? | | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent | | | | iii a sepai | ate nousenoia. | | | | |
| Do not list Debtor 1 and | | | | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of De | btor 2. | |
| Do not list Debtor 1 and | 2. | Do vou have | e dependents? | ■ No | | | | | |
| dependents names. Yes No No Yes No No Yes Yes | | Do not list De | - | _ | | | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 4d. Home contenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 | | Do not state | the | | | | | | □ No |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.000 4d. Homeowner's association or condominium dues 4d. \$ 0.000 | | dependents i | names. | | | | | | . — : |
| No Yes No Yes No Yes No Yes No Yes Yes No Yes | | | | | | | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues | | | | | | - | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home owner's association or condominium dues 4d. \$ 0.00 4d. Homeowner's association or condominium dues | | | | | | | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues | | | | | | | | | □ No |
| expenses of people other than yourself and your dependents? Yes Part 2: | • | _ | | | | | | | ☐ Yes |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues | 3. | expenses of | people other t | han $_{f \Box}$ | • • • | | | | |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 1,834.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | | | | | | | | | |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues Your expenses 4. \$ 1,834.00 4a. \$ 0.00 4b. \$ 0.00 4c. Homeowner's association or condominium dues 4d. \$ 0.00 | exp | enses as of a | | | | | | | |
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues Your expenses 4. \$ 1,834.00 4. \$ 0.00 4c. \$ 0.00 4d. Homeowner's association or condominium dues | Incl | ude expense | s paid for with | non-cash | government assistance i | f you know | | | |
| payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 1,834.00 4a. \$ 0.00 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 | | | | d have inc | cluded it on Schedule I: 1 | our Income | | Your exp | penses |
| 4a.Real estate taxes4a.\$4b.Property, homeowner's, or renter's insurance4b.\$4c.Home maintenance, repair, and upkeep expenses4c.\$4d.Homeowner's association or condominium dues4d.\$ | 4. | | | | _ | nclude first mortgag | | \$ | 1,834.00 |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00 | | If not includ | ed in line 4: | | | | | | |
| 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00 0.00 | | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 |
| 4d. Homeowner's association or condominium dues 4d. \$ 0.00 | | 4b. Proper | rty, homeowner's | | | | 4b. | \$ | |
| | | | | | | | | · | |
| | 5. | | | | | me equity loans | | · | |

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| ebtor 1 | Fiona Graham | Case num | per (if known) | 18-11502 |
|------------------|--|---------------|----------------|----------------------------|
| . Utiliti | es: | | | |
| . 6a. | Electricity, heat, natural gas | 6a. | \$ | 375.00 |
| | Water, sewer, garbage collection | 6b. | \$ | 30.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 50.00 |
| 6d. | Other. Specify: | 6d. | | 0.00 |
| | and housekeeping supplies | 7. | \$ | 375.00 |
| | care and children's education costs | 8. | \$ | 0.00 |
| - | | 9. | \$ | |
| | ing, laundry, and dry cleaning onal care products and services | 9. 10. | \$ | 0.00 |
| | • | | | 50.00 |
| | cal and dental expenses | 11. | \$ | 50.00 |
| | sportation. Include gas, maintenance, bus or train fare. ot include car payments. | 12. | \$ | 160.00 |
| | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| | itable contributions and religious donations | 14. | | 0.00 |
| 5. Insu r | _ | 14. | Ψ | 0.00 |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 48.96 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15c. | · | 255.00 |
| | Other insurance. Specify: | 15d. | | 0.00 |
| | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | — | 0.00 |
| Speci | | 16. | \$ | 0.00 |
| | Ilment or lease payments: | | - | 0.00 |
| | Car payments for Vehicle 1 | 17a. | \$ | 514.00 |
| | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | Other. Specify: | 17d. | · | 0.00 |
| | payments of alimony, maintenance, and support that you did not report a | | Ψ | 0.00 |
| | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I | | \$ | 0.00 |
| | r payments you make to support others who do not live with you. | ,- | \$ | 0.00 |
| Speci | | 19. | | |
| | r real property expenses not included in lines 4 or 5 of this form or on Sc | hedule I: Yo | ur Income. | |
| | Mortgages on other property | 20a. | | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| | r: Specify: Contribution to Elderly Parents | 21. | · | 600.00 |
| | Continuation to Lincity I dients | | - Ψ | 000.00 |
| | ulate your monthly expenses | | | |
| | Add lines 4 through 21. | | \$ | 4,341.96 |
| 22b. (| Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2 | \$ | |
| 22c. A | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,341.96 |
| | | | | -, |
| | ulate your monthly net income. | | | - :- |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 5,439.47 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,341.96 |
| | | | | |
| 23c. | Subtract your monthly expenses from your monthly income. | 23c. | \$ | 1,097.51 |
| | The result is your monthly net income. | 230. | Ψ | 1,007.01 |
| 4 Dove | ou expect an increase or decrease in your expenses within the year after | vou file this | form? | |
| | ample, do you expect to finish paying for your car loan within the year or do you expect you | | | ease or decrease because o |
| | cation to the terms of your mortgage? | | , | |
| ■ No |), | | | |
| | Explain here: | | | |

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| Debtor 1 | | | | | |
|--|---|-----------------------------|----------------------------|--|---|
| | Fiona Graham | | | | |
| O. h. t 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | Sankruptcy Court for the: | DISTRICT OF NEW JERSE | Y | | |
| | | | | | |
| Case number | 18-11502 | | | | |
| if known) | | | | | Check if this is an amended filing |
| ou must file th | nis form whenever you fi | n connection with a bankrup | amended schedules. Mai | king a false stat | ement, concealing property, or |
| | | 519, and 3571. | | | ou, or imprisonment for up to 20 |
| Sig | gn Below | 519, and 3571. | | | ou, or imprisonment for up to 20 |
| | gn Below | one who is NOT an attorney | to help you fill out bank | ruptcy forms? | ou, or imprisonment for up to 20 |
| | gn Below | | to help you fill out bankı | ruptcy forms? | ou, or imprisonment for up to 20 |
| Did you pa | gn Below | | to help you fill out bankı | Attach Ban | okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119 |
| Did you pa | gn Below ay or agree to pay some Name of person | | | Attach Bar Declaration | okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119 |
| Did you particle. No Yes. Under penathat they are | gn Below ay or agree to pay some Name of person alty of perjury, I declare | one who is NOT an attorney | | Attach Bar Declaration | okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119 |
| Did you particle No No Yes. Under penathat they an X /s/ Fio | gn Below ay or agree to pay some Name of person alty of perjury, I declare are true and correct. | one who is NOT an attorney | y and schedules filed wi | Attach Bar Declaration th this declarati | okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119 |

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| Fill in | this inforr | nation to identify you | r case: | | | |
|------------------|--|--|--|------------------------------------|-------------------------------------|------------------------------------|
| Debto | or 1 | Fiona Graham | | | | |
| | _ | First Name | Middle Name | Last Name | | |
| Debto (Spouse | or 2 e if, filing) | First Name | Middle Name | Last Name | | |
| United | d States Ba | nkruptcy Court for the: | DISTRICT OF NEW JERS | SEY | | |
| Case | number ' | 18-11502 | | | | |
| (if know | _ | | | | _ | Check if this is an mended filing |
| | | | | | | |
| Offi | <u>cial Fo</u> | <u>rm 107</u> | | | | |
| Stat | ement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 |
| inform | nation. If mer (if know | ore space is needed, n). Answer every que | ible. If two married people a attach a separate sheet to t stion. arital Status and Where You | this form. On the top of any | | |
| 1. V | /hat is you | r current marital statu | ıs? | | | |
| | MarriedNot mare | | | | | |
| 2. D | | | lived anywhere other than v | where you live now? | | |
| 2. D | _ | ast 5 years, have you | iived allywhere other thair | where you live now: | | |
| | No Yes. Lis | et all of the places you I | ived in the last 3 years. Do no | ot include where you live now | | |
| I | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev | | | |
| | No | | | | | |
| _ | - | ake sure you fill out Sch | nedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Part 2 | Explai | n the Sources of You | r Income | | | |
| F | ill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | time activities. | ndar years? |
| |] No | | | | | |
| | Yes. Fil | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$1,589.29 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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| | | | | Debtor 1 | | | Debtor 2 | | |
|-----|---|---|--|--|-------------------------------------|---|--|---------------------------|---|
| | | | | Sources of income Check all that apply. | (bef | ss income ore deductions and usions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | last calen nuary 1 to | | r 31, 2017) | ■ Wages, commissions, bonuses, tips | | \$44,101.00 | ☐ Wages, combonuses, tips | nmissions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | business | |
| | the calend | | efore that: r 31, 2016) | ■ Wages, commissions, bonuses, tips | | \$47,762.00 | ☐ Wages, combonuses, tips | nmissions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a | business | |
| 5. | Include include and other winnings. List each s | come regal public ben f you are f source and | rdless of wheth efit payments; iling a joint cas the gross inco | e during this year or the two er that income is taxable. Ex- pensions; rental income; inte- ee and you have income that ome from each source separa- | xamples erest; div t you rece | of other income are idends; money colle eived together, list it | alimony; child supp cted from lawsuits; only once under De | royalties; an ebtor 1. | |
| | ■ Yes. | Fill in the o | letails. | | | | | | |
| | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | Sources of income Describe below. | eacl (bef | ss income from h source ore deductions and usions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| | m January date you f | | ent year until ankruptcy: | Rental Income | | \$1,800.00 | | | |
| | last calen nuary 1 to | | r 31, 2017) | Rental Income | | \$21,600.00 | | | |
| | the calend | | efore that: r 31, 2016) | Rental Income | | \$21,600.00 | | | |
| Par | t 3: List | Certain P | avments You | Made Before You Filed for | r Bankru | iptcv | | | |
| 6. | Are either | Debtor 1 Neither [| 's or Debtor 2 Debtor 1 nor D | s debts primarily consume bebtor 2 has primarily cons personal, family, or househo | er debts sumer de | ? ebts. Consumer deb | ots are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | During th | e 90 days befo | re you filed for bankruptcy, o | did you p | ay any creditor a tot | al of \$6,425* or mo | re? | |
| | | □ No. | Go to line 7 | | | | | | |
| | | □ Yes | paid that cr not include | each creditor to whom you pa editor. Do not include payme payments to an attorney for | ents for d this ban | lomestic support obli kruptcy case. | gations, such as ch | nild support a | and alimony. Also, do |
| | | ^ Subjec | t to adjustmen | t on 4/01/19 and every 3 yea | ars after t | hat for cases filed or | n or after the date o | of adjustment | i. |
| | Yes. | | | r both have primarily cons re you filed for bankruptcy, o | | | al of \$600 or more? | ? | |
| | | ■ No. | Go to line 7 | | | | | | |
| | | ☐ Yes | include pay | each creditor to whom you pa ments for domestic support this bankruptcy case. | | | | | |
| | Creditor' | s Name aı | nd Address | Dates of paym | ent | Total amount paid | Amount you still owe | Was this | payment for |

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| 7. | Within 1 year before you filed for bankruptul Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen control, or owner of 20% o | eral partners; partners r more of their voting | erships of which yo g securities; and a | ou are a genera ny managing a | al partner; corporations gent, including one for |
|-----|--|---|--|--|----------------------------------|--|
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? | | ments or transfer a | any property on a | ccount of a de | ebt that benefited an |
| | Include payments on debts guaranteed or cos No | signed by an insider. | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| | | | paid | Still Owe | molade orde | nor o riamo |
| Pai | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | | Noture of the case | Court or oronov | | Ctatus of th | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below | | erty repossessed, f | oreclosed, garnis | shed, attached | l, seized, or levied? |
| | No. Go to line 11. | | | | | |
| | ☐ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | | | | | property |
| | | Explain what happened | 1 | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | luding a bank or fii | nancial institutior | n, set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | craditar took | Date | action was | Amount |
| | Creditor Name and Address | Describe the action the | creditor took | taker | | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | | erty in the possess | ion of an assigne | e for the bene | efit of creditors, a |
| | ■ No □ Yes | | | | | |
| | | | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No | tcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? |
| | Yes. Fill in the details for each gift. | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |

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| Dob | otor 1 Figure Craham | Document | Page 39 of 51 Case number | vr (if limanum) 40 44 E00 | | |
|---|--|--|--|-----------------------------------|-------------------------|--|
| Der | otor 1 Fiona Graham | | Case numbe | 18-11502 | | |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | | gifts or contributions with a to | tal value of more than ! | \$600 to any charity | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what | you contributed | Dates you contributed | Valu | |
| Par | t 6: List Certain Losses | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | otcy or since you filed fo | r bankruptcy, did you lose an | ything because of thef | , fire, other disaste | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | how the loss occurred | | coverage for the loss assurance has paid. List pending 33 of Schedule A/B: Property. | Date of your loss | Value of propert los | |
| Par | t 7: List Certain Payments or Transfers | | | | | |
| | consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | Description and transferred | | Date payment or transfer was made | Amount o | |
| | VIRGINIA E. FORTUNATO, L.L.C. One Kinderkamack Road Hackensack, NJ 07601 | | Attorney Fees: \$2,000.00 + costs | | | |
| | 123 Credit Counselors, Inc. 6161 Blue Lagoon Drive - Suite 255A Miami, FL 33126 | Credit Couns | eling | | \$20.0 | |
| 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or tr promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. | | | | or transfer any proper | ty to anyone who | |
| | Person Who Was Paid Address | Description and transferred | d value of any property | Date payment or transfer was made | Amount o | |
| | Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre | business or financial a made as security (such a | ffairs? s the granting of a security interest. | | | |

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Fiona Graham

| 19. | beneficiary? (These are often called asset-prote | | ny property to a | a self-settle | ed trust or similar device | of which you are a |
|-----|--|---|------------------|---------------|--|---|
| | Yes. Fill in the details. | | | | | |
| | Name of trust | Description and | value of the pro | operty tran | sferred | Date Transfer was made |
| Pai | tt 8: List of Certain Financial Accounts, Instr | uments, Safe Deposi | t Boxes, and S | torage Uni | ts | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No | other financial accou | nts; certificate | s of depos | | |
| | Yes. Fill in the details. | | | | | |
| | | ast 4 digits of account number | Type of acco | ount or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed fo | r bankruptcy, a | any safe de | posit box or other depos | itory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | place other than you | r home within | 1 year befo | re you filed for bankrupt | cy? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you still have it? |
| Pa | rt 9: Identify Property You Hold or Control fo | r Someone Else | | | | |
| 23. | Do you hold or control any property that some for someone. | eone else owns? Incl | ude any prope | rty you bor | rowed from, are storing | for, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe | the property | Value |
| Pa | rt 10: Give Details About Environmental Inform | mation | | | | |
| For | the purpose of Part 10, the following definition | s apply: | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s | air, land, soil, surfac | e water, groun | | | |
| | Site means any location, facility, or property a to own, operate, or utilize it, including disposa | | environmental | law, wheth | ner you now own, operate | e, or utilize it or used |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or | | as a hazardou | s waste, ha | azardous substance, toxi | c substance, |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | |
|--|--|---|--|------------------|--|
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any | y release of hazardous material? | | | |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | |
| 26. | Have you been a party in any judicial or admin | istrative proceeding under any envi | ironmental law? Include settlements ar | nd orders. | |
| | ■ No | | | | |
| | Yes. Fill in the details. Case Title | Court or agency | Nature of the case | Status of the | |
| | Case Number | Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | case | |
| Par | 11: Give Details About Your Business or Co | nnections to Any Business | | | |
| 27. | Within 4 years before you filed for bankruptcy, | , did you own a business or have ar | ny of the following connections to any | business? | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | | |
| | ☐ A member of a limited liability company | y (LLC) or limited liability partnersh | ip (LLP) | | |
| | ☐ A partner in a partnership | | | | |
| | ☐ An officer, director, or managing execu | utive of a corporation | | | |
| | ☐ An owner of at least 5% of the voting o | or equity securities of a corporation | | | |
| | ■ No. None of the above applies. Go to Part | t 12. | | | |
| | Yes. Check all that apply above and fill in | the details below for each business | S. | | |
| | Business Name De Address | escribe the nature of the business | Employer Identification number Do not include Social Security n | umber or ITIN. | |
| | (Number, Street, City, State and ZIP Code) | ame of accountant or bookkeeper | Dates business existed | | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | , did you give a financial statement | | de all financial | |
| | ■ No | | | | |
| | Yes. Fill in the details below. | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | |

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| Part 1 | 2: Sign Below | | |
|---------------------------------------|--------------------------------------|--|--|
| are tru with a | e and correct. I understand that mak | of Financial Affairs and any attachments, and I declare ting a false statement, concealing property, or obtaining up to \$250,000, or imprisonment for up to 20 years, or be | money or property by fraud in connection |
| /s/ Fi | ona Graham | | |
| Fiona Graham Signature of Debtor 1 | | Signature of Debtor 2 | |
| Date | February 19, 2018 | Date | |
| Did yo | u attach additional pages to Your St | atement of Financial Affairs for Individuals Filing for Ba | nkruptcy (Official Form 107)? |
| ■ No | | | |
| ☐ Yes | 3 | | |
| Did yo | u pay or agree to pay someone who | is not an attorney to help you fill out bankruptcy forms? | ? |
| ■ No | | | |
| ☐ Yes | s. Name of Person . Attach the B | Bankruptcy Petition Preparer's Notice, Declaration, and Signa | ature (Official Form 119). |

| Fill in this information to identify your case: | | | | | |
|---|--|--|--|--|--|
| Debtor 1 | Fiona Graham | | | | |
| Debtor 2 (Spouse, if filing) | | | | | |
| United States E | Bankruptcy Court for the: District of New Jersey | | | | |
| Case number (if known) | 18-11502 | | | | |

| Check | Check as directed in lines 17 and 21: | | | | | | | |
|-------|--|--|--|--|--|--|--|--|
| 1 | According to the calculations required by this Statement: | | | | | | | |
| - | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). | | | | | | | |
| | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). | | | | | | | |
| | 3. The commitment period is 3 years. | | | | | | | |
| | 4. The commitment period is 5 years. | | | | | | | |

 \square Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| | | | • | | | | | | |
|---|------------|--|--------------------|------------------------------|-------------------------------------|------------------------------|---------------------------|--|-------------------------------|
| P | art | 1: Calculate Your Average Monthly Income | | | | | | | |
| 7 | | What is your marital and filing status? Check one | only. | | | | | | |
| | | ■ Not married. Fill out Column A, lines 2-11. | | | | | | | |
| | | ☐ Married. Fill out both Columns A and B, lines 2-11 | | | | | | | |
| | 10 the | I in the average monthly income that you received from a 1(10A). For example, if you are filing on September 15, the 6-6 6 months, add the income for all 6 months and divide the tot ouses own the same rental property, put the income from that | month peal by 6. F | eriod would ill in the re | be March 1 throusult. Do not includ | ugh August 3 de any incom | 31. If the amone amount m | ount of your monthly income ore than once. For example | e varied during e, if both |
| | | | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing spouse | |
| 2 | <u>2</u> . | Your gross wages, salary, tips, bonuses, overtime payroll deductions). | e, and co | ommissio | ons (before all | \$4 | ,191.55 | \$ | |
| 3 | 3. | Alimony and maintenance payments. Do not includ Column B is filled in. | e payme | ents from | a spouse if | \$ | 0.00 | \$ | |
| 4 | ۱. | All amounts from any source which are regularly popular or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a sport you listed on line 3. | rt. Includ | de regula: depende | r contributions nts, parents, | \$ | 0.00 | \$ | |
| | 5. | Net income from operating a business, profession, or farm | Debto | r 1 | | | | | |
| | | Gross receipts (before all deductions) | \$_ | 0.00 | | | | | |
| | | Ordinary and necessary operating expenses | -\$_ | 0.00 | | | | | |
| | | Net monthly income from a business, profession, or fa | arm \$_ | 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| 6 | S . | Net income from rental and other real property | Debto | | | | | | |
| | | Gross receipts (before all deductions) | \$_ | 0.00 | | | | | |
| | | Ordinary and necessary operating expenses | - \$ _ | 0.00 | | | | | |
| | | Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ | |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Fiona Graham Case number (if known) 18-11502 Debtor 1 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.191.55 +|\$ 4,191.55 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,191.55 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 4,191.55 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4,191.55 15a. Copy line 14 here=>____ Multiply line 15a by 12 (the number of months in a year). **x** 12 50,298.60 15b. The result is your current monthly income for the year for this part of the form.

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| Debte | or 1 | Fio | na Graham | | | Case number (if known) | 18-11502 | | |
|-------|--------------|-----------------|---|-------------|----------------------|-------------------------------|-----------------|----------------|----------------|
| 16 | | | e the median family income that applies to | you. Fol | • | | | | |
| | 16a | . Fill i | n the state in which you live. | | NJ | | | | |
| | 16b | . Fill i | n the number of people in your household. | | 1 | | | | |
| | 16c | To f | n the median family income for your state and nd a list of applicable median income amoun uctions for this form. This list may also be av | its, go onl | ine using the link s | | | \$ | 64,901.00 |
| 17 | . Hov | | the lines compare? | anabio at | the bankruptoy old | ika amaa. | | | |
| | 17a | | Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do | | | • | | | |
| | 17b | . [| Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 | culation | | | | | |
| Par | t 3: | C | alculate Your Commitment Period Under 1 | 1 U.S.C. | § 1325(b)(4) | | | | |
| 18. | Cop | у уо | ur total average monthly income from line | 11 | | | \$ | | 4,191.55 |
| 19. | cont spor | tend t use's | he marital adjustment if it applies. If you are hat calculating the commitment period under income, copy the amount from line 13. | 11 U.S.C | c. § 1325(b)(4) allo | | | | 0.00 |
| | 19a | . If th | e marital adjustment does not apply, fill in 0 o | n line 19a | ā. | | -\$ | | 0.00 |
| | 19b | . Sub | tract line 19a from line 18. | | | | | \$ | 4,191.55 |
| 20. | Cal | culat | your current monthly income for the yea | r. Follow | these steps: | | | | |
| | 20a | . Cop | y line 19b | | | | | \$ | 4,191.55 |
| | | Mul | iply by 12 (the number of months in a year). | | | | | X | 12 |
| | 20b | . The | result is your current monthly income for the | year for t | his part of the form | | | \$ | 50,298.60 |
| | 20c | . Cop | y the median family income for your state and | d size of I | nousehold from line | 9 16c | | \$ | 64,901.00 |
| | 21. | Hov | do the lines compare? | | | | | | |
| | | | Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4. | vise orde | red by the court, or | n the top of page 1 of this f | form, check bo | эх 3, <i>Т</i> | he commitment |
| | | | Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4. | Jnless oth | nerwise ordered by | the court, on the top of pa | ge 1 of this fo | rm, ch | eck box 4, The |
| Par | | | gn Below g here, under penalty of perjury I declare that | t the infor | mation on this state | ement and in any attachm | ents is true an | d corre | ect. |
|) | _ | | na Graham | | | | | | |
| | | | Graham re of Debtor 1 | | | | | | |
| | • | Fe | bruary 19, 2018 | | | | | | |
| | If yo | | /I / DD / YYYY cked 17a, do NOT fill out or file Form 122C-2 | 2. | | | | | |

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-11502-SLM Doc 14 Filed 02/19/18 Entered 02/19/18 18:17:07 Desc Main Document Page 50 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtDistrict of New Jersey

| In r | e Fiona Graham | | _ c | Case No. | 18-11503-SLN | И |
|------|--|---|---------------|---|---|-------------------|
| | | Debtor(s) | C | Chapter | 13 | |
| | DISCLOSURE OF COMPEN | ISATION OF ATTORN | EY F | OR DE | BTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, or | agreed to | o be paid | to me, for service | |
| | The compensation paid or agreed to be paid by the do follows: For legal services rendered, debtor(s) agree to p | ebtor(s) to the undersigned is as pay an hourly rate of \$495.00. | _ | | | |
| | Prior to the filing of this statement I have received | | \$ | | 2,000.00 | |
| | Estimated Dalamas Dana | | \$ | not invoic with a fe prior to as it | 0.00***Please te an itemized ce will be filed ee application confirmation is my office's d practice.*** | |
| 2. | The source of the compensation paid to me was: | | | | | |
| | ✓ Debtor | | | | | |
| 3. | The source of compensation to be paid to me is: Debtor Other (specify): | | | | | |
| | _ | | | | | |
| 4. | ✓ I have not agreed to share the above-disclosed compe | nsation with any other person unl | ess they | are memb | pers and associate | s of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name | | | | | ıy law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to ren | der legal service for all aspects of | the ban | kruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. The attorney reserves the right to seek additional comp | ment of affairs and plan which mars; and | y be req | uired; | - | |
| | | CERTIFICATION | | | | |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | agreement or arrangement for pay | yment to | me for re | epresentation of the | ie debtor(s) in |
| _ | February 19, 2018 | /s/ Virginia E. Fortunato | | | | |
| | Date | Virginia E. Fortunato Signature of Attorney VIRGINIA E. FORTU One Kinderkamack Hackensack, NJ 076 201-673-5777 Name of law firm | NATO, Road | L.L.C. | | |

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United States Bankruptcy CourtDistrict of New Jersey

| Debtor(s) Chapter 13 | |
|----------------------|--|
| | |
| | |
| | |

| | VERIF | ICATION OF CREDITOR MATRIX |
|---------|---------------------------------------|--|
| The abo | ove-named Debtor hereby verifies that | t the attached list of creditors is true and correct to the best of his/her knowledge. |
| Date: | February 19, 2018 | /s/ Fiona Graham Fiona Graham Signature of Debtor |